

REPORT

ANNUAL REPORT 2018

SHARE - CENTRE FOR RESILIENCE IN HEALTHCARE



Main partners



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Thor Ole Gulsrud, *Head of Department of Quality and Health Technology*, UiS

Contents

ABOUT	4	VISITING SCHOLARS	18
SHARE.....	4	OTHER ACTIVITIES	20
Organisation and Main Research Themes	5	Annual Christmas Seminar	20
LARGE RESEARCH PROJECTS	6	Resilience in Healthcare Seminars	21
SAFE-LEAD: Improving quality and safety in primary care	6	SHARE Joint Research Seminar in Stavanger.....	22
InvolveMENT - To strengthen adolescents' mental health services	7	Writing seminar at Farsund Resort	22
QUALinCLINstud	8	RESEARCH DISSEMINATION	23
Resilience in Healthcare.....	9	7 th Resilient Health Care Net Meeting	23
PHD PROJECTS AND POSTDOCTORAL PROJECTS	10	5 th Nordic Conference on Research in Patient Safety and Quality in Healthcare (NSQH) 30-31 August	24
CONSORTIUM PARTNERS	11	Engaging the Public in Research	25
Patient Safety Research Group at NTNU Gjøvik.....	11	NETWORK FOR CARER RESEARCH	26
Prehospital Patient Safety at the Norwegian Air Ambulance Foundation.....	12	PUBLICATIONS	27
RESEARCHER PROFILES	13	Journal articles	27
Sina Furnes Øyri (34), Stavanger	13	Book	29
Tore Karlsen (60), Gjøvik.....	14	Book chapters.....	29
Foteini T. Kalakou (45), Sandnes.....	15	Conference contributions and scholarly presentations	30
RESEARCH STAYS	16	Popular science contributions	32
Marianne Storm - A Harkness Fellow.....	16	Media contributions	34
Siri Wiig.....	17		

ABOUT



IMAGE: KENTOH/ISTOCKPHOTO

SHARE

The Centre for Resilience in Healthcare (SHARE) at the University of Stavanger (UiS) is Norway's foremost academic institution focused on research related to quality and safety in healthcare systems. The Centre has an interdisciplinary approach to research on quality and safety, and includes competence within the fields of nursing, medicine, psychology, sociology, safety science, and engineering. There are currently more than 40 researchers affiliated with the Centre.

Knowledge is most valuable when it is shared generously.

SHARE is based at the Faculty of Health Sciences at UiS. The consortium furthermore involves two national partners, *Norwegian Air Ambulance Foundation (SNLA)* and *Norwegian University of Science and Technology Gjøvik (NTNU Gjøvik)*. The three partners hold complementary competencies across acute care settings, long-term care settings, system approaches, involvement strategies, and collaborative learning approaches.

The SHARE research strategy document, "Research Strategy 2018–2022", was formally approved at the inaugural SHARE board meeting on March 1st 2018. In it,

the strategic vision of SHARE is set out as follows: "*SHARE will become an internationally recognized research centre by reforming the quality and safety of current healthcare systems (micro, meso, macro level) using a new and comprehensive resilience in Healthcare (RiH) framework*".

Furthermore, the SHARE motto "*Knowledge is most valuable when it is shared generously*" conveys the message that all researchers are expected to share ideas, analyses and results with one another, with the broader research community, and with the wider community (partners, stakeholders, society).

Organisation and Main Research Themes

To be able to fulfil the priorities, objectives and work tasks outlined in the research strategy, the following organizational resources and infrastructure issues are vital to successfully achieve the vision of the SHARE Centre:

- An active SHARE Board consisting of members representing Centre partners and external institutions.
- A Scientific Advisory Board constituted by international members at the forefront of quality and safety research, as well as patient and stakeholder representatives.
- A competent SHARE management team consisting of research coordinators, the Centre director, and resources for communications and financial administration.
- A stable level of externally funded research projects.
- Experienced thematic leads within the strategic priorities.

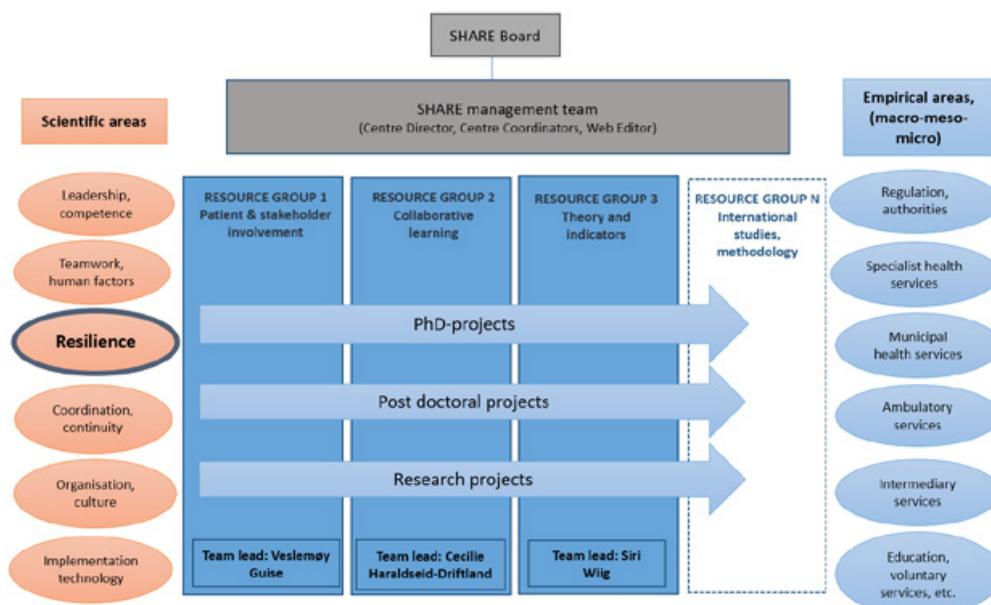
- Committed PhD supervisory teams with international co-supervisors and international mentoring support for post-doctoral scholars.
- A structured researcher mobility plan organized by a dedicated mobility committee.
- Joint office location for SHARE researchers at the UiS campus, including available office space for SHARE partners and visiting scholars.

The organisation of SHARE follows a model of resource groups, scientific areas and empirical areas (see figure). Three strategic resource groups were established in 2018; Patient and Stakeholder

Involvement, Collaborative Learning, and Resilience Theory and Indicators, each with a team lead. All PhD-projects, post doctoral projects, and research projects may use one or several of the resource groups to input to their project within the respective fields.

In addition to the three resource groups, the scientific fields covered by SHARE researchers span the following areas:

- Leadership, competence
- Teamwork, human factors
- Resilience studies
- Coordination, continuity
- Organisation, culture
- Implementation, technology



LARGE RESEARCH PROJECTS

SHARE – SAFE LEAD.

Bottom from left: Terese Johannessen, Lene Schibevaag, Berit Ullebust, Anne Torhild Sandvik Pedersen, Siri Wiig. Top from left: Karina Aase, Elisabeth Holen Rabbersvik, Eline Ree, Elsa Kristiansen, Torunn Grinvoll, Torunn Strømme, Marianne Storm.

SHARE RESEARCHERS

Professor Siri Wiig (Project Manager)
Professor Marianne Storm
Professor Karina Aase
Associate professor Ingunn Aase
Postdoctoral candidate Eline Ree
PhD candidate Terese Johannessen
PhD candidate Torunn Strømme
Research coordinator
Lene Schibevaag

CO-RESEARCHERS

Berit Ullebust, Førde municipality – Center for Development of Institutional and Home Care Services, Sogn and Fjordane County

Line Hurup Thomsen, Stavanger municipality – Center for Development of Institutional and Home Care Services, Rogaland County

Elisabeth Holen Rabbersvik, Songdalen municipality – Center for Development of Institutional and Home Care Services, Vest Agder County

Anne Torhild Sandvik Pedersen, next of kin representative

Elsa Kristiansen, patient representative

Torunn Grindvoll, Directorate of Health, Patient and User Ombudsman, Vestfold County

PARTNERS

Associate Professor Hester van de Bovenkamp, Erasmus University Rotterdam, the Netherlands

Professor Roland Bal, Erasmus University Rotterdam, the Netherlands

FUNDING

Research Council Norway – HELSEVEL

BUDGET

22 mill NOK (12 mill RCN)

PROJECT PERIOD

1 October 2016–30 September 2020

SHARE – Centre for Resilience in Healthcare
Annual Report 2018



SAFE-LEAD: Improving quality and safety in primary care

SAFE-LEAD is an implementation study that aims to build leadership competence and to assist primary care managers in their efforts to advance and improve quality and safety strategies, attitudes and practices, by providing evidence-based measures for safer, more efficient management and organization of primary care services.

There is a lack of effective management tools in primary care for dealing with quality and safety issues to ensure that patients receive the best possible healthcare services. There is also a need for improved quality and safety competencies among leaders and managers in home healthcare and nursing homes. The SAFE-LEAD project builds and expands on the outcomes of a recent EU FP7 project called QUASER, in which a research-based quality and safety leadership tool (the QUASER-guide) was developed for European hospitals managers to support their quality and safety improvement work.

The SAFE-LEAD project will further develop and adapt the QUASER guide to the Norwegian primary health care setting, and implement and evaluate it across a variety of

primary care settings. Specifically, this leadership intervention will be tested in four nursing homes and four homecare services in urban and rural municipalities across Norway. The results from the Norwegian study will be compared with results from a similar implementation study in the Netherlands.



InvolveMENT researchers and youth representatives: Petter Viksveen, Stig E. Bjønness, Nicole Elizabeth Cardenas, Oliver Cuddeford, Maren Andvik, Samuel Duerto, Celina Hetlelid, Maya Ibenfeldt, Martine Olivia Johansen, Lou Krigjer, Laia Gomez Meldahl, and Mathias Tong. Morad Mustafa and Julia Rose Game were not present when the picture was taken.



InvolveMENT - To strengthen adolescents' mental health services

SHARE RESEARCHERS

Postdoctoral candidate
Petter Viksveen (project manager)
PhD Candidate
Stig Erlend Bjønness

CO-RESEARCHERS

Nicole Elizabeth Cardenas
Oliver Cuddeford
Julia Rose Game
Morad Mustafa

USER REPRESENTATIVES

Maren Andvik
Samuel Duerto
Celina Hetlelid
Maya Ibenfeldt
Martine Olivia Johansen
Lou Krigjer
Laia Gomez Meldahl
Mathias Tong

FUNDING

University of Stavanger

PROJECT PERIOD

Autumn 2016 - Spring 2020

The InvolveMENT project aims to improve the quality of healthcare services to strengthen adolescents' health and to prevent mental health conditions.

Forty percent of Norwegian adolescents report mental health problems that affect their everyday life. Eight percent have been diagnosed with a mental health condition. Only half of those who struggle with mental health problems report to have been in touch with healthcare services. Four out of ten who do so will drop out from treatment. There is considerable room to strengthen healthcare service for young people with mental health complaints.

In order to contribute to improved access to and quality of both primary and secondary mental health services for adolescents, the InvolveMENT project uses multiple methods. Both qualitative studies and questionnaire surveys are used to learn about young people's use of, experiences with and perspectives on healthcare services. Also of interest is to examine facilitators and barriers to the use of mental health services, and to explore how adolescents can become actively involved in their own treatment.

The experiences and perspectives of healthcare practitioners' are also explored.

As part of the project, an eHealth intervention application will be developed to support adolescents' mental health and to facilitate improved access to healthcare services. Participants will be followed up over several years to learn about long-term outcomes of the intervention.

Twelve adolescents are actively involved as user representatives and co-researchers throughout all phases of the project. This includes research planning, carrying out the research, and the dissemination and publishing of research results. The group of user representatives and co-researchers includes those with an ethnic Norwegian background, as well as youth with other ethnic backgrounds.

LARGE RESEARCH PROJECTS

SHARE RESEARCHERS

Professor Kristin Akerjordet
(project manager)

**Associate professor
Kristin A. Laugaland**

**Associate professor
Ingunn Aase**

**PhD candidate
Christina Tølbøl Frøiland**

CO-RESEARCHERS

Son Than Tran,
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Jannicke Bekkelund,
Stavanger municipality

PARTNERS

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Professor Marianne Gonzalez,
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University of Agder

Associate professor Else Mari Ekra,
University of Agder

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University of Agder

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Denmark

Professor Patrick Crookes,
University of Canberra

Professor Stephen Billett,
Griffith University, Australia

FUNDING

Research Council Norway –
HELSEVEL

BUDGET

14 mill RCN

PROJECT PERIOD

1 June 2018–30 May 2022

SHARE – Centre for Resilience in Healthcare
Annual Report 2018

QUALinCLINstud

The aim of the QUALinCLINstud project is to improve the quality of the clinical supervision and assessment of student nurses in nursing homes by developing, testing and evaluating an innovative web-based supervision and assessment program in close collaboration with a number of stakeholders from nursing homes and the nursing education sector.

Bachelor of Nursing students in Norway currently spend 50 per cent of their time in the study program in clinical practice placements. These clinical placements constitute a central learning arena in professional nursing education. High quality supervision and assessment of students in clinical practice is therefore essential to the training of competent and independent nurses. The QUALinCLINstud project puts the spotlight on nursing homes as important clinical learning arenas by aiming to increase the quality and efficiency of the supervision and assessment given to first year students in practice placements in nursing homes.

The QUALinCLINstud project will employ a multiple case study design using a mixed-methods approach organized in four work packages. The initial phases of the study will explore current clinical supervision and assessment practices across nursing homes from a multi-stakeholder perspective. Ways in which the nursing education system can ensure the high quality of nursing home placements will also be explored. Based on these findings, a web-based supervision and assessment program featuring innovative



Photo: Siv Sivertsen

e-learning tools will be developed, pilot tested and evaluated together with key stakeholders.

This innovation to optimize the efficiency in nursing education and practice will target three equally important stakeholder groups: (1) nurse mentors / supervisors, (2) first-year nursing students, and (3) nurse teachers. Quality improvement in supervision and assessment will be assessed according to the following dimensions: a) nurse mentors' supervision and assessment competencies, b) student nurses' critical thinking skills and learning experiences, and c) nurse teachers' assessment tools.

SHARE RESEARCHERS

Professor Karina Aase

(project manager)

Professor Siri Wiig

Professor Signe Berit Bentsen

Professor Ove Njå

Associate professor Stephen Sollid

Postdoctoral candidate

Veslemøy Guise

Postdoctoral candidate

Cecilie Haraldseid-Driftland

PARTNERS

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University of Geneva, Switzerland

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Professor Stephen Billett,

Griffith University, Australia

Professor Roland Bal, Erasmus

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FUNDING

Research Council Norway - FRIPRO

TOPPFORSK, University of Stavanger,

NTNU Gjøvik, The Norwegian Air

Ambulance Foundation

BUDGET

66 mill

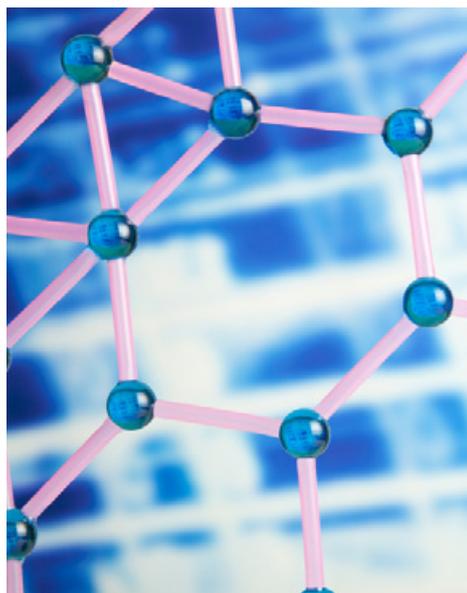
PROJECT PERIOD

1 September 2018 - 31 August 2023

Resilience in Healthcare

The primary goal of the Resilience in Healthcare (RiH) project is to reform the quality of current healthcare systems by establishing a new and comprehensive Resilience in Healthcare framework.

Research efforts to understand and reduce healthcare induced adverse events has traditionally focused on healthcare failures. Significant advancements have yet to be made, however, as internationally the rate of harm has remained steady at about 10% for hospitalised patients. The relative consistency of these findings has gradually led to the conclusion that traditional research that relies on a range of standardised 'find and fix' methods is inadequate for understanding healthcare quality. Rather, such research must focus on the inherent complexity of healthcare systems, which are characterized by multiple stakeholder interactions and a significant degree of performance variability within and across system levels.



Resilience is a systems approach concerned with the proactive ability of organisations and individuals to anticipate, monitor,

respond to and learn from variability and disruptions. Resilience is about adapting everyday functioning to successfully resolve challenging organisational conditions, allowing for operations to continue with a sound level of quality. Resilient characteristics have been largely unexplored in the healthcare sector, with the exception of small-scale case studies within certain clinical areas. In-depth empirical research from multiple large-scale clinical practice settings is of crucial importance to systematically map, test and evaluate concepts and interventions related to resilience in a variety of clinical settings and empirical contexts.

The RiH project will shift the research focus from healthcare failures to the overwhelming majority of healthcare processes with successful outcomes, to determine how high quality is generated in everyday clinical work across different healthcare systems. It will apply a longitudinal collaborative research design within (a) the emergency chain and (b) the continuity chain. Empirical data on the healthcare processes involved when patients move along these two chains will be of major analytical interest. The project will feature long-term multidisciplinary collaboration between national and international researchers interacting with a wide variety of healthcare stakeholders. The empirical research will result in an evidence-based RiH framework that will model the ability of healthcare providers to anticipate, monitor, respond to and learn from variability and disruptions. Through the development and implementation of such a framework, the RiH project will seek to build and support resilient systems and processes across the entire healthcare services.

PHD PROJECTS AND POSTDOCTORAL PROJECTS

PhD Projects

Telecare in transitional care

Hilde Marie Hunsbedt (UiS)

Leading quality and safety in primary care

Terese Johannessen (UiS)

Implementation of shared decision making within mental health

Stig Bjønnes (UiS)

Healthcare professionals competence in homecare

Torunn Strømme (UiS)

The access to necessary health care in light of the priority challenges

Solveig Hodne Riska (UiS, UiB)

A discharge pathway to meet the supportive care needs of patients with prostate cancer post hospitalization

Foteini Tsandila Kalakou (UiS)

Co-production of homecare services for senior citizens

Christophe E Kattouw (UiS)

Resilience and Regulation in Healthcare – mechanisms, challenges and opportunities

Sina Øyri (UiS)

Quality in supervision and assessment practices of nursing students in nursing home studies

Christina Tølbøl Frøiland (UiS)

Simulation-based telecare training for home health care professionals

Veslemøy Guise (UiS)

Medication administration in nursing homes

Kristian Ringsby Odberg (NTNU Gjøvik)

Teamwork in hospitals

Oddveig Reiersdal Aaberge (NTNU Gjøvik)

Improving diagnostic imaging services

Ann Mari Gransjøen (NTNU Gjøvik)

Quality indicators in prehospital Advanced airway management

Alexander Kottmann (SNLA)

Air ambulance crew composition

Kristen Rasmussen (SNLA)

Certification and accreditation in the specialist health services

Dag Thomas Sagen Johannesen (UiA)

Safety culture in nursing homes

Kathrine Cappelen (USN/UiS)

Telecare to prevent unnecessary hospital admissions

Martha Therese Gjesten (SUS/UiS)

Safe practices for suicidal patients in psychiatric inpatient care

Siv Hilde Berg (SUS/UiS)

Improving cancer care quality: Next of kin involvement

Inger Johanne Bergerød (SUS/UiS)

Variability in hospital readmission rates across municipalities

Malin Knutsen (HVL/UiS)

Professionals' perspectives on telecare

Torunn Johannessen (HVL/UiS)

On-call insitu simulation

Per Bredmose (SNLA)

Simulation-based team training of non-technical skills among anaesthetic staff.

Anne Strand Finstad (OUS)

High-fidelity simulation as part of clinical practice in nursing homes

Camilla Olaussen (LDH/UIS)

Postdoctoral projects

Quantitative and qualitative studies of the impact and experiences of a leadership intervention in nursing homes and homecare

Eline Ree

InvolveMENT – To strengthen adolescents' mental health services

Petter Viksveen

Patient and stakeholder involvement in resilient healthcare

Veslemøy Guise

Translating Resilience in Healthcare into practice by establishing a collaborative learning framework

Cecilie Haraldseid-Driftland

CONSORTIUM PARTNERS

Patient Safety Research Group at NTNU Gjøvik

NTNU

Department of Health Sciences in Gjøvik

The partners of SHARE, at the back from left: Anne Kristin M. Wiik (NAAF), Uta Gjertsen (NAAF), Karina Aase (UiS), Marie Louise Hall-Lord (NTNU Gjøvik), Randi Ballangrud (NTNU Gjøvik). In front from left: Kristin Akerjordet (UiS), Stephen Sollid (NAAF, SUS), Lene Schibeveag (UiS), Kristian Ringsby Odberg (NTNU Gjøvik). (PHOTO: MARI HULT)



The patient safety research group is one of six research groups at the Institute of Health Science (IHG), Faculty of Medicine and Health, NTNU. The research group lead is Professor Marie Louise Hall-Lord.

In 2018, there were 14 members in the research group: three professors, six associate professors, four doctoral candidates and one master student. The research group had meetings about once a month, where ongoing projects, new project ideas, possible funding and various theoretical perspectives were discussed. Article drafts, project plans and data analyses were presented at seminars and participation in conferences was reported.

The research in the patient safety group has a Human Factors approach and the goal is to contribute to the improvement of systems and processes, thus leading to patient safety in the health care services. Ongoing projects include:

- Inter-professional teamwork in hospitals – a human factors approach to patient safety.
- A human factors approach to medication administration in nursing homes.
- Improving the use of diagnostic imaging services: a guideline implementation study.
- Comprehensive care planning; nurses' perception of elderlies' participation in transitional care.

- Simulation-based team training of non-technical skills among anesthesia personnel.
- Implementing TeamSTEPS®2.0 team-training program in bachelor of nursing curriculum to enhance teamwork skills and patient safety.
- Patient safety in obstetric care, and
- Teamwork and patient safety culture – health care personnel's perceptions and attitudes.

In April 2018, research group member Anne Vifladd defended the thesis *Patient safety culture in a Norwegian hospital trust. The association with structural changes and organizational and individual factors*. In addition, members of the research group had seven scientific papers published or accepted, while three papers were submitted to scientific journals. Six papers were reported orally or as a poster at international conferences and national conferences. The project *Prehospital Safe Medication Administration. A study of decision-making and pain management* planned and applied for a doctoral student at IHG.

The research group mainly collaborates with SHARE, University of Stavanger, Innlandet Hospital Trust, and Karlstad University, Sweden.

CONSORTIUM PARTNERS

Prehospital Patient Safety at the Norwegian Air Ambulance Foundation

The Norwegian Air Ambulance Foundation (NAAF) are one of the main partners in the SHARE Centre. NAAF have defined their activities in SHARE as part of their own research cluster Prehospital Patient Safety. This is part of the general collaborative partnership between NAAF and the University of Stavanger (UiS) on research and education in prehospital critical care.



Stephen Sollid giving a lecture to the MSc Prehospital Critical Care students at UiS (PHOTO CREDIT: FREDRIK NAUMANN / FELIX FEATURES)

In the context of SHARE, NAAF have made an obligation to fund one (associate) professorate as cluster leader in prehospital patient safety and one full time, or two part time postdoctoral positions in the cluster, alternatively two PhD fellowships. Currently, Assistant Professor Stephen Sollid acts as the cluster leader. Further, NAAF presently funds three PhD projects in SHARE, with two more projected to be established during 2019. In addition, NAAF funds five further PhD projects at UiS in the PhD program Health and Medicine, alongside five academic positions, of whom two professorates.

The three NAAF PhD projects that are currently situated within SHARE are:

- “Comparing risk management in different medical crew composition models in Helicopter Emergency Medical Services” by Kristen Rasmussen.
- “Identification, validation and benchmarking of quality indicators in prehospital advanced airway management” by Alexander Kottmann.
- “National implementation of whole crew on-call in situ simulation in Norwegian HEMS; feasibility, challenges and benefits” by Per Bredmose.

In 2018, the activities related to NAAF's involvement in SHARE produced four peer-reviewed publications. Both the cluster leader and the PhD students have held scientific presentations at a number of international conferences throughout 2018, and have participated in scientific networks related to advanced prehospital critical care. Kottmann and Sollid have also been involved in teaching activities in the MSc Prehospital Critical Care at UiS.



RESEARCHER PROFILES

Meet three of SHARE's 25 PhD Candidates: **Sina**, a jurist with a master's degree in societal safety, **Tore**, an intensive care nurse and university lecturer, and **Foteini**, a clinical psychologist and counsellor for cancer patients and their families. Despite their different backgrounds, they are all dedicated to patient safety and enhancing resilience in healthcare. We have asked them to tell us who they are, what they are researching, and how their research will be applied.

Sina Furnes Øyri (34), Stavanger



I earned a Master of Laws from the University of Oslo and spent a semester at the University of North Dakota in the U.S. After that I completed a bachelor's degree in political science at the University of Stavanger (UiS). As part of my studies here I had two stays abroad. First as a visiting student at the Stavanger Region European Office in Brussels, and then as an exchange student at the University of California, Berkeley. I also have a master's degree in societal safety from the UiS. Alongside my studies I have worked for the Norwegian Correctional Service and at a large oil company. Pursuing my PhD through SHARE has given me the opportunity to explore my particular interest in the field of law, politics and safety. It will also give me an outlet for creativity and exploration through art and cultural experiences, travel, architecture and skiing.

My project is called *Resilience and Regulation in Healthcare – mechanisms, challenges and opportunities*. I would like to explore the new internal control regulation, *Regulation on management and quality improvement in the healthcare services*, which came into effect on 1 January 2017. Through document analysis and qualitative interviews I will examine how the regulation facilitates or hampers resilience (robustness) in hospitals. This will be studied on three levels, in national regulatory bodies, county governor offices and hospital management.

I want to look into the government's rationale for adjusting the internal control regulation into a leadership-focused regulation for quality improvement, and what impact Norwegian health authorities expect the new regulation to have in terms of resilience and improvement of hospital quality. I would also like to learn how the supervisory authorities adapt and improve their supervision practices following the regulatory changes as well as examine how hospital department managers experience this in hospital practice.

SHARE has different approaches to resilience, which is such an important concept for the research centre that it even forms part of its name. While regulations and supervisory practices are an important part of health services, resilience and regulatory management have traditionally been perceived as two competing approaches. A PhD project in the field of regulation, supervision and patient safety that challenges and ties these approaches together is therefore an important contribution to SHARE's research portfolio.

The research is important for several reasons. Governments need knowledge about this in order to better enable them to prepare relevant and useful regulations, instructions and guidelines.

RESEARCHER PROFILES

Moreover, the study could have an impact in the field of practice, particularly for hospital management, because their experience with regulation is highlighted. It will be particularly interesting to see whether the authorities' goals and expectations of the regulation correspond with the experiences expressed

both by those who supervise and managers who apply the regulations in their daily work in hospitals. The fact that regulation can be viewed as removed from practical reality is nothing new, but a study that examines this on three different levels is unploughed land.

Tore Karlsen (60), Gjøvik



I am a registered nurse with specialist training in intensive care, and hold a master's degree in clinical nursing. For the past 25 years I have worked in hospitals, mostly in intensive care and coronary care units. I have also been a lecturer at a post graduate intensive care education program for 15 years at the Department of Health Sciences at NTNU in Gjøvik. I am married, father of two grown children and a grandfather of two boys. In my spare time I enjoy brewing beer and riding my motorcycle.

My research project is on teamwork in the health service. The idea is that teamwork skills can be learned and are essential to safe practise. Experience has shown that many of the errors and adverse events that occur in healthcare are very much due to a lack of teamwork skills. Healthcare personnel and nurses work mostly in teams, either multidisciplinary or monodisciplinary, to provide patients with safe care and treatment. Key teamwork skills are team communication, team leadership, situation monitoring and mutual support in teams.

Patient safety is the ultimate goal for improving team skills. The research involves nursing students because nursing programmes have lacked practice and a focus on team training until now. We are testing a knowledge-based training programme called TEAMSTEPPS, which has been integrated into existing

courses and clinical placement studies for nursing students over a two-year period. Teaching is concentrated around training and simulation as a pedagogical method.

The research will be conducted as a survey before, during and after teaching is completed. Two other nursing education institutions will serve as control groups. An observation study will also be conducted during simulation exercises to register how teamwork skills are used to solve tasks efficiently and safely. Interviews with the students involved are also planned. I am affiliated with SHARE through the collaboration agreement the Department of Health Sciences at NTNU in Gjøvik has with the Centre.

With my research I wish to contribute to increased patient safety by training nurses in teamwork skills and knowledge about the correlation between teamwork skills and patient safety. The study will be published in international journals of nursing education and patient safety. I will present my findings at relevant conferences. My hope is that the study will contribute to enhance the focus on teamwork skills, and the need for team-training in the bachelor of nursing curriculum. In my opinion, practising good teamwork skills is as essential as correct medication calculation and hygiene to ensure safe and secure patient care in the future of modern healthcare.



Foteini T. Kalakou (45), Sandnes

I have a master's degree in clinical counselling psychology from LaSalle University (USA) and have worked with supporting children with cancer and their families at Children's hospital in Athens, Greece. Luckily, I was born and spent my first years in Toronto, Canada, so I am used to the cold climate in Norway. After I arrived here, I started volunteering for the Norwegian Cancer Society, with people who had various types of cancer, often men. This gave me an insight into their concerns and needs, and it inspired me to develop my research project.

Prostate cancer is the most common type of cancer among Norwegian men, with 4,900 diagnosed in 2017 alone. Treatment and support within the hospital is well organised and of high quality, but once they are released from the hospital there are many physical, psychological, emotional and informational needs that are not safeguarded. Most problems occur 3–6 months after discharge, and the information provided by healthcare practitioners varies a lot. Only those patients who actively seek help, receive the support that they need. This contributes to inequity in healthcare services.

My project aims to empower these patients by creating a pathway that will serve as a bridge between hospitalisation and life after treatment. I want to enable them to ask their GP the right questions, and to be aware of existing support services.

The working title of my project is "A discharge pathway to meet the supportive care needs of patients with prostate cancer post hospitalization".

My research is part of SHARE's work to improve the quality of healthcare services. I will interview patients and their partners or next of kin, cancer support groups, health

care practitioners, cancer coordinators and hospital management. Their contributions will help us develop the pathway, which we will implement and test in clinical practice. The project involves patient and stakeholder representatives throughout all phases of the research.

The end product will include a form of discharge model for patients with prostate cancer, to be implemented in Norwegian hospitals. I started my PhD last May, and my project has three stages: Create the pathway, pilot it in clinical practice, and implement and test its effectiveness with more patients. I hope that this research will also serve as a discharge model to be used for patients with other cancer types.

Marianne Storm – A Harkness Fellow

During 2017–2018 she was a Harkness Fellow and spent a year at The Dartmouth Institute of Health Policy and Clinical Practice.

The Harkness Fellow Commonwealth Fund represents a unique opportunity to spend up to 12 months in the United States as a Harkness Fellow in Health Care Policy and Practice. Fellows work with leading U.S. experts to study health care delivery reforms and critical issues on the health policy agenda in both the U.S. and their home countries. A rich program of seminars organized by the Fund throughout the year further enhances the fellowship experience.

During her time in the US, Marianne’s mentors were Stephen Bartels, M.D., M.S. (Herman O. West Professor of Geriatrics; Director, Dartmouth Centers for Health and Aging, The Dartmouth Institute of Health Policy and Clinical Practice) and co-mentor Martha L. Bruce, PhD, M.P.H. (Professor of Psychiatry, Geisel School of Medicine and The Dartmouth Institute for Health Policy and Clinical Practice)

Marianne’s research project was entitled *Quality in the Coordination and Continuity of Mental Healthcare*:

Project Abstract: Health care systems often struggle to meet the care and treatment needs of older adults with serious mental illness and chronic medical comorbidities. Collaborative care models and those that integrate mental health services into primary care have been developed to improve care coordination and outcomes for this population. Despite these promising efforts, little is known about how health care services can best be coordinated for older adults with serious mental illness and chronic medical



Marianne Storm, professor of Health Sciences, Faculty of Health Sciences, University of Stavanger.

conditions, and what key components should be included in a care model to assist those living in the community. The project aims to investigate how health services are coordinated for older adults with serious mental illness, with a particular focus on the coordination of medical and mental health services. In addition, it aims to examine where there is a need to improve care coordination and how this can be achieved. The study is conducted in health care organizations applying different care coordination models in their service delivery. Data sources will include individual interviews with administrative leaders and health care professionals employed in the selected organizations.

Siri Wiig

In November 2018, Siri Wiig, Professor of Quality and Safety in Healthcare Systems, spent a month at Florence Nightingale Faculty of Nursing and Midwifery, King's College London. This visit was part of a one year sabbatical, which Wiig will spend as a visiting professor with three of the SHARE Centre's collaboration partners in England, the Netherland and Australia.

Dr. Janet Anderson, Reader in Health Care Improvement, was Siri's host at King's College London. There has been close collaboration between UiS and King's College London since 2010 when Anderson and Wiig both participated in the EU funded research project *QUASER* (2010–2013). Current collaboration includes publications, PhD co-supervision, and ongoing SHARE research projects. Anderson is involved in both the NFR TOPP-FORSK project *Resilience in Healthcare* (2018–2023), and in the NFR *SAFE-LEAD Primary Care* project (2016–2020), where Wiig is project manager. *SAFE-LEAD* aims to implement the leadership guide developed in the *QUASER* project, in which Anderson led the development process.

Wiig and Anderson have several joint research interests, mainly related to resilience in healthcare, human factors, patient involvement, and healthcare regulation. The main purpose of the research visit was therefore to discuss possible publications and research project development, in addition to writing an article together. The stay resulted in the drafting of two papers from a process evaluation, of which Anderson was involved in one where the data were interpreted from a resilience in healthcare perspective.

Anderson kindly let Wiig share her office during the visit, and organized meetings with her research group. Before Wiig travelled home, they both attended a one day seminar at the Imperial Patient Safety Translational Research Centre at Imperial



Location of the research visit, James Clerk Maxwell Building, Waterloo campus.

College, London. The seminar included keynote lectures from high profile patient safety researchers such as Professor Ara Darzi, director of the Institute of Global Health Innovation at Imperial College, London, Professor Rebecca Lawton, University of Leeds, and Professor David Bates, Harvard Medical School.



Siri Wiig and Janet Anderson at the Victoria and Albert Museum, London

VISITING SCHOLARS

As part of SHARE's internationalization efforts the Centre hosted four fellow scholars during the spring and summer of 2018. In addition to furthering SHARE's research collaboration with international institutions, the purpose of these international research visits was to contribute to the planning of new research activities at SHARE, including the development of grant proposals, and to hold seminars and give lectures to SHARE researchers.

Three of these visits were funded through the mobility initiative of the University of Stavanger and the newly opened Campus Hotel Ydalir. These were visits by Carl Macrae (England), Clare Relton (England), and Carolyn Canfield (Canada). In addition, Stephen Billett (Australia) visited SHARE twice during 2018.



Carl Macrae is a social psychologist based at Nottingham University Business School. He is an established researcher within safety investigation and resilience with a multi sector background. His research has recently led to the establishment of the first national independent safety body for healthcare in England, the Healthcare Safety Investigation Branch (HSIB). In addition,

Carl is a visiting senior research fellow at the Department of Experimental Psychology at the University of Oxford, UK. Carl visited SHARE for six weeks and contributed to current publications and research activities within resilience and safety investigation. He also hosted a joint SHARE-SEROS seminar on accident investigation and learning.



Carolyn Canfield is a Canadian citizen patient affiliated with the University of British Columbia where she is Adjunct Professor in the Department of Family Practice. Carolyn is one of the few professional patient citizen researchers in the world with personal experience as both next-of-kin and as a patient. She currently focuses her research on resilience and patient safety. In addition,

Carolyn is a member and founder of the Resilience Healthcare Network (RHCN) in which SHARE also has an active role. Carolyn visited SHARE for four weeks and contributed to the start-up of our Resilience in Healthcare grant. She also gave an open lecture titled "Where's the Patient in Patient Safety? New perspectives on health system complexity".



Clare Relton is a Senior Research Fellow from the School of Health and Related Research at the University of Sheffield. She is among Europe's leading scientists within cohort methodology and has collaborated

over several years with Petter Viksveen from SHARE. During her one-week visit at SHARE, Clare worked on a grant proposal focused on improving adolescents' mental health.



Stephen Billett visited SHARE from Brisbane, Australia as a guest lecturer and project consultant in June and December 2018. Stephen Billett is Professor of Adult and Vocational Education in the School of Education and Professional Studies at Griffith University, and an Australian Research Council Future Fellow. He has had a long career working as a vocational educator, educational administrator, teacher educator, professional development practitioner and policy developer in vocational education, in addition to having researched

learning through and for work for over 25 years. He has published widely within the fields of learning of occupations, workplace learning, work and conceptual accounts of learning for vocational purposes. While at SHARE, he contributed to planning work and research design related to the "Resilience in Healthcare" (RiH) project, in which he is a co-investigator in work-package 6 on Collaborative Learning. Professor Billett also gave an open lecture titled "Collaborative learning at work: Healthcare work and learning practices".

OTHER ACTIVITIES

SHARE organized several research events during 2018 that were open to all researchers associated with the Centre. These events included monthly research meetings held during the two semesters of the academic year, which all featured scientific presentations of ongoing research, as well as information and discussions about future research activities. In addition, a variety of seminars were arranged throughout the year, with an overall focus on sharing knowledge.



Anne Strand Finstad presenting her research to SHARE colleagues at the annual Christmas seminar.

Annual Christmas Seminar

On Thursday the 13th of December, the annual SHARE Christmas seminar is a nice occasion for SHARE researchers to get together with colleagues on a social level. This gathering also featuring formal research presentations and informal summaries of various research activities that have taken place within SHARE throughout the year. This

year the Christmas seminar was held at Vik, outside of Stavanger, and the main presenter was SHARE PhD scholar Anne Strand Finstad from Oslo University Hospital. Her talk was titled “Simulation-based team training of non-technical skills among anaesthesia personnel – mapping, experiences of benefit, and compliance”.



Professor Roland Bal.

Resilience in Healthcare Seminars

As part of the start-up of the Resilience in Healthcare (RiH) project, which officially began in September 2018, a seminar series was held at UiS in November and December, featuring three invited professors from the UK, the Netherlands and Australia, respectively. The three seminars each consisted of an open lecture followed by a workshop on a topic of central to the RiH project. The seminar series was mainly aimed at PhD students, their supervisors, and Post-Doctoral Fellows, and was attended by over 40 people both internal and external to SHARE across the three days.

Professor Mary Chambers visited on Monday the 12th of November to give a lecture titled «Patient and Public Involvement in Healthcare Research» and to lead a workshop on patient and stakeholder involvement in research on quality and safety in healthcare systems. Mary Chambers is Professor of Mental Health Nursing and Director of the Centre for Public Engagement at Kingston University and St George's, University of London, UK. Pro-



Professor Mary Chambers

essor Chambers has a well-established record of patient and public involvement (PPI) in education and research. She is a co-investigator in work-package 2 of the RiH project, which is concerned with the integration of patient and stakeholder involvement in the theoretical, methodological and practical activities of the project.

Professor Roland Bal was our invited speaker on Wednesday the 5th of December. He gave a lecture on “The layered nature of resilience. How management and regulation are related to resilience at work floor levels”. He also co-hosted a workshop on theory development related to resilience in healthcare with SHARE professor Siri Wiig. Roland Bal is Professor of Healthcare Governance at Erasmus University Rotterdam. His main research interest is in the building, functioning and consequences of knowledge infrastructures for the governance of healthcare. Currently his work focuses on information infrastructures for quality and safety in health care. Professor Bal is involved in work-package 1 of the RiH project, concerned with developing an integrative theoretical framework for resilience in healthcare.



Professor Stephen Billett alongside SHARE Centre Director Karina Aase, SHARE Communications Lead Cecilie Haraldseid-Driftland, and Centre Research Coordinator Veslemøy Guise.

Professor Stephen Billett joined us again from Griffith University in Australia on Tuesday the 11th of December, to speak about “Working and learning together: Responding and adapting to changing work practices” and to lead a workshop on collaborative learning together with SHARE Centre Director Karina Aase. The purpose of the workshop was to explore the concepts of collaborative working and learning and how these ideas can support the goals and activities of SHARE projects. Professor Billett is a co-investigator in work-package 6 of the RiH project, concerning the development of a collaborative learning framework related to resilience in healthcare.

OTHER ACTIVITIES

SHARE Joint Research Seminar in Stavanger

SHARE researchers from across the three partner institutions attended a joint research seminar at the University of Stavanger on the 12th and 13th of April 2018. The seminar was attended by 30 researchers from across the three main partners in SHARE, and included PhD candidates, Postdoctoral researchers, Associate Professors, and Professors. Four recently started or ongoing research projects central to the Centre were presented, alongside results from eight PhD projects and three postdoctoral projects. In addition, there were three presentations on funding bids and proposed future research projects.



Attendees at the 2018 SHARE Research Seminar at UiS.

The view at Farsund Resort



Writing seminar at Farsund Resort

In June 2018, a three day writing seminar was organized for SHARE researchers in beautiful and inspiring surrounds at Farsund Resort outside of Farsund in the south of Norway.

A total of 20 researchers from UiS and NTNU Gjøvik attended. The three days were structured into six writing sessions in combination with a social program featuring communal meals, including an outdoor barbeque, nature walks in the surrounding area, and the infamous Farsund Resort team quiz.

RESEARCH DISSEMINATION



Attendees at the 7th Resilient Health Care Net Meeting outside Hindsgavl Castle on Fyn island, Denmark.
(PHOTO: RESILIENTHEALTHCARE.NET)

7th Resilient Health Care Net Meeting

SHARE Centre Director Karina Aase and SHARE Professor Siri Wiig both attended the 7th Resilient Health Care Net Meeting held at Hindsgavl Castle on the island of Fyn in southern Denmark on the 13th to the 15th of August 2018. This instalment of the annual Resilient Health Care Net Meeting was organized by the Centre for Quality, situated in Middelfart, Denmark.

Attended by many of the main academic proponents of resilience in healthcare, the Resilient Health Care Net Meetings have become important meeting arenas for SHARE researchers. At the 2018 meeting, Siri Wiig, in collaboration with Carl Macrae from Nottingham University, presented on “Developing a multilevel resilience in health care framework”. Karina Aase, together

with Carolyn Canfield from the University of British Columbia and Jane O’Hara from Leeds Institute of Medical Education at the University of Leeds gave a presentation titled “A framework for patient and carer involvement in resilience studies (TOGETHER)”.

RESEARCH DISSEMINATION



SHARE researchers at NSQH 2018.
From left: Espen Olsen, Karina Aase,
Petter Viksveen, Inger Johanne
Bergerød, Nicole Elizabeth Cardenas,
Eline Ree, Cecilie Haraldseid-Driftland,
Kristian Ringsby Odberg, Malin
Knutsen, Stig Erlend Bjønness, Torunn
Strømme and Lene Schibevaag.

5th Nordic Conference on Research in Patient Safety and Quality in Health- care (NSQH) 30-31 August

For the 2018 NSQH conference the venue was Copenhagen and SHARE researchers contributed in great numbers to the conference. SHARE made up the largest delegation with regards to scientific contributions of all the Nordic countries. SHARE researchers organized two workshops, had eight poster presentations and six oral presentations. All the poster presenters also participated

in the “Speed poster Presentation” on the first day of the conference.

In addition centre director Karina Aase held one out of four key note presentations at the conference. Her presentation was entitled: “Taking Resilience in Healthcare to the next level” and was widely attended.

Centre Director Karina Aase in conversation with the public in Stavanger city centre



Engaging the Public in Research

On Saturday the 27th of October 2018, researchers from SHARE set up a stand in the middle of Stavanger city centre, with the purpose of engaging directly with the public regarding their views on future research priorities. Knowing what interests and concerns people have constitutes useful information that can be included in future planning and implementation of research at SHARE.

Of particular concern was being able to engage with young people and to get them interested in becoming involved with research. Youth mental health was therefore one of the main topics of discussion for the SHARE researchers on the stand. Four in ten high school students across five municipalities in Rogaland County report that they have struggled with mental difficulties that affect their daily lives. Half of them have not had any contact with healthcare services.

One of the SHARE researchers behind the stand was postdoctoral fellow Petter Viksveen. As part of his research, Petter works closely with young people, some of whom are involved as co-researchers in the InvolveMENT project. Through this project they have conducted surveys among fellow high school students. They also provide input on what they think it is most important to focus on in further research on youth and mental health.

“The aim of our research is to contribute toward helping more people. We want to use web-based solutions to make it easier for young people to get in touch with healthcare services when they need to. Young people will also become more actively involved in their own treatment”, says Petter.

One of the questions posed to people on the day was how they feel if they are not on the social media app Snapchat for a day. According to Petter, many Norwegian youths spend hours on Snapchat every day, so as not to lose their ‘streaks’. A streak is achieved if one exchanges Snapchat messages – so-called snaps – with someone for more than three consecutive days. If you are unable to send a snap within 24 hours, however, the streak will end. “The media has presented stories of young people losing their desire to live when they lose a streak that has been running for hundreds of days. In the informal survey conducted at the stand, 38 percent answered that they would be in a bad mood if they were unable to use Snapchat for a day. We want to find out more about how social media such as Snapchat affects young people’s mental health. We will continue to look further into this in our research.”



“How do you feel when you are not on Snapchat for a day: happy or not?” People could answer the question by pressing one of the buttons

NETWORK FOR CARER RESEARCH

The Network for Carer Research was established at the University of Stavanger in 2013. The main purpose of the network is to contribute to the development, dissemination and visibility of knowledge and competence within the field of carer research, primarily by gathering together researchers, clinical practitioners, and representatives of other stakeholder groups. The network currently has approximately 160 members across Scandinavia (mostly members from Norway). Annual network gatherings have taken place to create an arena where researchers, health personnel, relatives and other interest groups can meet to disseminate knowledge, and exchange and develop research ideas and projects related to caregiver research.

Carer research is concerned with developing knowledge and understanding of the role and significance of unpaid caregivers in health and social care services, education, and research. This includes knowledge of carers' own need for support and information, how to increase opportunities for meaningful carer involvement, and how to safeguard caregivers as an integral part of the health and social care system. Going forward, the Network for Carer Research aims to generate increased activity within carer related research, education and practice, including facilitation of increased involvement and participation of carers in all these areas.

During 2018, the administration of the Network for Carer Research became integrated into the SHARE Centre, with Inger Johanne Bergerød and Heidi Dombestein as network coordinators and Karina Aase and Siri Wiig as the scientific leads. The Faculty of Health Sciences will fund the two part-time coordinator positions related to the network for 2019, while the SHARE Board has allocated operational funds for the network. The network will be an important facilitator of the work concerning patient and stakeholder involvement taking place within SHARE.

In November 2018, a multi-stakeholder working group met at SHARE to develop a five year strategy for the network. The following network members from SHARE par-



Participants at the research strategy workshop (left to right): Unn Birkeland, Rannveig Tvette Zachrisen, Anne Torhild Pedersen, Heidi Dombestein, Karina Aase, Randi Martinsen, Una Stenberg og Inger Johanne Bergerød (Kirsten Jæger Fjetland, Lene Schibevaag og Siri Wiig were not present for the photo)

icipated: Inger Johanne Bergerød, Heidi Dombestein, Karina Aase, Lene Schibevaag, Rannveig Tvette Zachrisen and Siri Wiig. External participants in the working group were Unn Birkeland, Pårørendesenteret, Kirsten Jæger Fjetland, VID Sandnes, Randi Martinsen, Innlandet University College, Anne Torhild Pedersen, next of kin, and Una Stenberg, National Competence Centre for learning and mastery in health at Oslo University Hospital.



Network Coordinators Inger Johanne Bergerød (left) and Heidi Dombestein

PUBLICATIONS

The researchers within and affiliated with the SHARE Research Centre has contributed to a total of 157 different publications. There has been published a total of 40 journal articles, 1 book, 4 book chapters, 47 conference contributions and scholarly presentations, 61 popular science contributions and 4 media contributions.

Journal articles

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